

**HAZARD CONTROL PLAN AND WORK AUTHORIZATION** Page 1 of 2

This form is from ESH-17-035

1. Describe the work to be performed (use continuation page if needed) or give procedure number, revision number, and title.

HCP-ESH-17-Winch, R0

Title: Operation of Ramsey 9000 Winch on Dakota

Winch may be used to extricate vehicle when stuck in snow or mud during sample collection trips.

2. Describe potential hazards associated with the work (use continuation page if needed).

Cable coming loose: cable could come off while under load and whip back to strike personnel.

Pulling tree over onto vehicle: if a weak tree is used as an anchor for the cable, it could be pulled over when a load is applied.

Pinches, scrapes, cuts: hands can become scraped by cable, pinched in guide rollers, or cut by wire burrs when handling cable during unwinding or rewinding.

3. For each hazard, list the likelihood and severity, and the resulting initial risk level (before any work controls are applied, as determined according to LIR300-00-01.0, section 7.2)

Cable coming loose: improbable / critical = low.

Pulling tree over onto vehicle: improbable / critical = low.

Pinches, scrapes, cuts: occasional / moderate = low.

Overall *initial* risk: ☐ Minimal ☒ Low ☐ Medium ☐ High

4. Applicable Laboratory, facility, or activity operational requirements directly related to the work:

☒ None ☐ List:Work Permits required? ☒ No ☐ List:

5. Describe how the hazards listed above will be mitigated (e.g., safety equipment, administrative controls, etc.):

Follow all instructions for operation and operational limitations given in owner's manual.

Keep a copy of the manual in the vehicle at all times.

Always have a heavy blanket available to place over the cable.

Keep gloves available for use whenever handling cable.

Be sure the attachment point is strong enough to withstand the force to be applied when the winch is used. If using a tree, place the attachment as low as possible on the tree.

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6. Knowledge, skills, abilities, and training necessary to safely perform this work (check one or both):

☐

Group-level orientation (per ESH-17-032) and training to applicable procedure.

☒

Other → Describe:

Read and understand the manufacturer's operation manual for the winch.

7. Any wastes and/or residual materials? (check one) ☒ None ☐ List:

8. Considering the administrative and engineering controls to be used, the *residual* risk level (as determined according to LIR300-00-01.0, section 7.3.3) is (check one):

☐

Minimal

☒

Low

☐

Medium (requires approval by Division Director)

9. Emergency actions to take in event of control failures or abnormal operation (check one):

☐

None

☒

List:

In the event of serious injury, call 911. For other injuries, call supervisor and take person to hospital.

If injuries do not require immediate medical attention, take person to ESH-2,

After this form is approved, perform the work safely. Identify opportunities for improvements in safety and report these to the safety officer or group leader.

Preparer(s) signature(s)

Name(s) (print)

/Position

Date

[NOTE: Training to a procedure constitutes authorization.] **If this work is NOT described by a procedure:** I have reviewed the safety of this proposed work with the group safety officer and I commit to follow safe practices when performing this work.

Employee signature

Name (print)

Date

Additional employee signature (optional)

Name (print)

Date

Additional employee signature (optional)

Name (print)

Date

**Group leader or safety officer review.**

I have reviewed the proposed work with 1) the preparer(s) and 2) employees who will perform the work (if not described in a procedure) and I believe the hazards and safety concerns have been adequately addressed. The work as described above is hereby authorized. This authorization expires one year after the date below.

Group leader or safety officer signature

Name (print)

Date

This plan will be revised according to ESH-17-035. Group leader or safety officer: After completion, submit to ESH-17 Records Coord.

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**Hazard Control Plan continuation page. Give item number being continued.**